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FILED  
Apr 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000049196 (6)

1. Corporation Name

EKANA GOLF & COUNTRY CLUB, INC.

Principal Place of Business

Mailing Address

2100 EKANA DR.  
OVIEDO FL 32765

2100 EKANA DR.  
OVIEDO FL 32765

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1994

4. FEI Number

59-2652586

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

SOBERING, GRAY & WHITE, P.A.  
201 S. ORANGE AVENUE  
SUITE 760  
ORLANDO FL 32801

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

8 ETCHISON, DAVID  
1084 KELLY CREEK CIR  
OVIEDO FL

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P AIR, DAVID  
2180 FIRE STONE DR  
OVIEDO FL

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

T LEE, RICHARD  
8097 LAKE CHARM  
OVIEDO FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P MICHAEL GOINS  
1048 LONG BRANCH LANE  
OVIEDO FL 32765

☐ Change ☒ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S KEN HERRINGTON  
11427 SWIFT WATER CIRCLE  
ORLANDO FL. 32817

☐ Change ☒ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CR2E034 (10/97)